

Attorney Docket No.: 071550.0022

Your Ref. No.: 102552

International Ap #: PCT/AU99/00424

Int'l Filing Date: 06/02/99

DECLARATION AND POWER OF ATTORNEY

(Original Application)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

PURIFICATION OF ANTIBODIES

the specification of which is attached hereto and/or was filed on December 1, 2000 as Application No. 09/701,818.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to herein.

I acknowledge the duty to disclose information which is material to patentability in accordance with Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d), of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

FOREIGN PRIORITY APPLICATION(S)

PP3855	AUSTRALIA	02/JUNE/1998
(Number)	(Country)	(Day/month/year filed)

Priority Claimed☒ Yes ☐ No

(Number)	(Country)	(Day/month/year filed)

Priority Claimed☐ Yes ☐ No

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional patent application(s) listed below and have also identified below any United States provisional patent application(s) having a filing date before that of the application on which priority is claimed:

PROVISIONAL PRIORITY PATENT APPLICATION(S)

		<u>Priority Claimed</u>
		<input type="checkbox"/> Yes <input type="checkbox"/> No
_____ (Application No.)	_____ (Filing Date)	
		<u>Priority Claimed</u>
		<input type="checkbox"/> Yes <input type="checkbox"/> No
_____ (Application No.)	_____ (Filing Date)	

And I hereby appoint the registered attorneys and agents associated with AKIN, GUMP, STRAUSS, HAUER & FELD, L.L.P., Customer No. 000027000, as my attorneys or agents with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Address all correspondence to Customer No. 000027000, namely, AKIN, GUMP, STRAUSS, HAUER & FELD, L.L.P., 1333 New Hampshire Avenue, N.W., Suite 400, Washington, D.C. 20036. Please direct all communications and telephone calls to

Alex Chartove
AKIN, GUMP, STRAUSS, HAUER & FELD, L.L.P.
1333 New Hampshire Avenue, N.W.
Suite 400
Washington, D.C. 20036
Phone: (202) 887-4149
Fax: (202) 955-7613
e-mail: achartove@akingump.com

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full name of sole
or first inventor DENNIS BRIAN RYLATT

Inventor's Signature *Dennis B Rylatt*

Date 16/01/01

Residence 10 Stuart Street, Ryde, NSW, 2112, AUSTRALIA

Citizenship AUSTRALIAN

Post Office 10 Stuart Street, Ryde, NSW, 2112, AUSTRALIA
Address

Full name of second
joint inventor, if any SHARON LIM

Inventor's Signature *x Sharon Lim*

Date *x* 19/01/01

Residence 28/61-89 Buckingham Street, Surry Hills, NSW, 2010, AUSTRALIA

Citizenship AUSTRALIAN

Post Office 28/61-89 Buckingham Street, Surry Hills, NSW, 2010, AUSTRALIA
Address

Full name of third
joint inventor, if any

Inventor's Signature

Date

Residence

Citizenship

Post Office

Address